DIAGNOSTIC			RELINE LOWER PARTIAL DENTURE	D5741	97.83
PERIODIC ORAL EXAM	D0120	22.94	RELINE UPPER COMPLETE DENTURE	D5750	196.60
PROBLEM FOCUSED EXAM	D0140	33.60	RELINE LOWER COMPLETE DENTURE	D5751	196.60
COMPREHENSIVE ORAL EXAM	D0150	33.60	RELINE UPPER PARTIAL DENTURE	D5760	180.49
			RELINE LOWER PARTIAL DENTURE	D5761	180.49
<u>RADIOGRAPHS</u>			TEMPORARY COMPLETE DENTURE (U)	D5810	287.69
INTRAORAL COMPLETE WITH BITEWINGS	D0210	72.06	TEMPORARY COMPLETE DENTURE (L)	D5811	287.69
INTRAORAL PERIAPICAL 1ST FILM	D0220	13.39	TEMPORARY UPPER PARTIAL	D5820	260.12
INTRAORAL PERIAPICAL EACH ADD FILM	D0230	7.54	TEMPORARY LOWER PARTIAL	D5821	260.12
OCCLUSAL FILM	D0240	9.79	TISSUE CONDITIONING-MAXILLARY	D5850	43.28
BITEWING 1 FILM	D0270	13.39	TISSUE CONDITIONING-MANDIBULAR	D5851	43.28
BITEWINGS 2 FILMS BITEWINGS 4 FILMS	D0272 D0274	21.30 29.09	OVERDENTURE COMPLETE (cusil only)	D5860	581.97
PANORAMIC FILM	D0274 D0330	41.12	ODAL SUDCEDV		
PANORAMIC FILM	D0330	41.12	ORAL SURGERY EXTRACTION SINGLE TOOTH	D7140	66.61
PREVENTIVE			SURGICAL REMOVAL ERUPTED TOOTH	D7140 D7210	121.00
PROPHYLAXIS	D1110	43.78	SURGICAL REMOVAL EROFTED TOOTH SURGICAL REMOVAL TISSUE IMPACTED	D7210 D7220	121.00
TROTTTE/IMB	DIIIO	43.76	SURGICAL REMOVAL PARTIALLY BONY	D7230	188.00
AMALGAM RESTORATIVE			SURGICAL REMOVAL FULL BONY	D7240	229.42
AMALGAM ONE SURFACE	D2140	60.00	SURGICAL REMOVAL UNUSUAL COMP.	D7241	229.42
AMALGAM TWO SURFACES	D2150	75.00	SURGICAL REMOVAL RESIDUAL ROOTS	D7250	105.83
AMALGAM THREE SURFACES	D2160	90.00			
AMALGAM FOUR SURFACES	D2161	108.00	ALVEOPLASTY		
			IN CONJUNCTION WITH EXTRACTIONS	D7310	78.27
RESIN RESTORATIONS			(PER QUADRANT)		
RESIN ONE SURFACE, ANTERIOR	D2330	68.54	IN CONJUNCTION WITH EXTRACTIONS	D7311	61.18
RESIN TWO SURFACES, ANTERIOR	D2331	88.55	(ONE TO THREE TEETH, PER QUADRANT)		
RESIN THREE SURFACES, ANTERIOR	D2332	108.70	NOT IN CONJUNCTION WITH EXTRACTIONS	D7320	97.38
RESIN FOUR OR MORE SURFACES, ANTERIOR	D2335	129.20	(PER QUADRANT)		
RESIN ONE SURFACES, POSTERIOR	D2391	60.00	NOT IN CONJUNCTION WITH EXTRACTIONS	D7321	77.61
RESIN TWO SURFACES, POSTERIOR	D2392	75.00	(ONE TO THREE TEETH, PER QUADRANT)		
RESIN THREE SURFACES, POSTERIOR	D2393	90.00			
RESIN FOUR SURFACES, POSTERIOR	D2394	108.00	<u>VESTIBULOPLASTY</u>		
			UNCOMPLICATED (PER ARCH)	D7340	137.20
PROSTHETHICS (CROWNS)			COMPLICATED (PER ARCH)	D7350	205.68
RESIN/PREDOMINANTLY BASE METAL	D2721	364.80			
PORCELAIN/BASE METAL CROWN	D2751	404.37	EXCISION OF BONE TISSUE		
FULL CAST CROWN	D2791	364.80	REMOVAL OF EXOSTOSIS (PER SITE)	D7471	159.63
RECEMENT CROWN	D2920	35.69	REMOVAL OF TORUS PALATINUS	D7472	226.60
PREFABRICATED STAINLESS STEEL CROWN	D2931	112.86	REMOVAL OF TORUS MANDIBULARIS	D7473	212.44
SEDATIVE FILLING	D2940	32.91	SURGICAL REDUCTION OF OSSEOUS	D7485	209.61
CROWN BUILDUP INCLUDING ANY PINS	D2950	108.00	TUBEROSITY		
PIN RETENTION CAST POST & CORE IN ADDITION TO CROWN	D2951 D2952	18.66	CURCICAL INCICION		
PREFABRICATED POST/CORE IN ADDITION	D2952 D2954	117.47 104.93	SURGICAL INCISION INCISION AND DRAINAGE OF ABCESS	D7511	461.13
FREE ABRICATED FOST/CORE IN ADDITION	D2934	104.93	INTRAORAL SOFT TISSUE	D/311	401.13
ENDODONTICS			INCISION AND DRAINAGE OF ABCESS	D7521	750.61
ROOT CANAL THERAPY - ANTERIOR	D3310	327.00	EXTRAORAL SOFT TISSUE	D7321	750.01
ROOT CHAIL THERE I THAT I THAT ENGLY	23310	327.00	Extra forcing bot 1 Hisbot		
PROSTHODONTICS			TREATMENT OF FRACTURES		
COMPLETE UPPER DENTURE	D5110	700.00	ALVEOLUS, CLOSED REDUCTION	D7771	704.73
COMPLETE LOWER DENTURE	D5120	700.00	STABILIZATION OF TEETH		
IMMEDIATE UPPER DENTURE	D5130	746.00			
IMMEDIATE LOWER DENTURE	D5140	746.00	OTHER REPAIR PROCEDURES		
UPPER ACRYLIC PARTIAL	D5211	655.00	FRENULOPLASTY	D7963	233.40
LOWER ACRYLIC PARTIAL	D5212	655.00			
UPPER CAST PARTIAL	D5213	655.00	ADJUNCTIVE GENERAL SERVICES		
LOWER CAST PARTIAL	D5214	655.00	EMERGENCY TREATMENT OF DENTAL PAIN	D9110	30.87
UPPER FLEX PARTIAL	D5225	655.00	GENERAL ANESTHESIA (30 mins)	D9220	162.00
LOWER FLEX PARTIAL	D5226	655.00	GENERAL ANESTHESIA (each add. 15 mins)	D9221	81.00
ADJUST COMPLETE UPPER DENTURE	D5410	24.47	ANALGESIA	D9230	30.19
ADJUST COMPLETE LOWER DENTURE	D5411	24.47	I.V. SEDATION (30 mins)	D9241	99.70
ADJUST UPPER PARTIAL DENTURE	D5421	24.47	I.V. SEDATION (each additional 15 mins)	D9242	54.29
ADJUST LOWER PARTIAL DENTURE	D5422	24.47	HOUSE CALL/EXTENDED CARE FACILITY	D9410	36.64
REPAIR BROKEN COMPLETE DENTURE	D5510	65.21	HOSPITAL CALL	D9420	82.10
REPLACE MISSING/BROKEN TEETH	D5520	59.36	OFFICE VISIT	D9430	20.17
REPAIR ACRYLIC SADDLE OR BASE	D5610	64.44			
REPAIR CAST FRAMEWORK	D5620	69.15			
REPAIR OR REPLACE BROKEN CLASP	D5630	135.84			
REPLACE BROKEN TEETH (PER TOOTH)	D5640	58.85			
ADD TOOTH TO EXISTING PARTIAL ADD CLASP TO EXISTING PARTIAL	D5650	77.98 108.57			
REBASE COMPLETE UPPER DENTURE	D5660 D5710	108.57 254.72			
REBASE COMPLETE LOWER DENTURE	D5710 D5711	254.72 254.72			
REBASE PARTIAL UPPER DENTURE	D5711 D5720	254.72 203.84			
REBASE PARTIAL LOWER DENTURE	D5720 D5721	203.84			
RELINE UPPER COMPLETE DENTURE	D5721 D5730	97.83			
RELINE OFFER COMPLETE DENTURE	D5730 D5731	97.83			
RELINE LOWER COMITETE BENTURE RELINE UPPER PARTIAL DENTURE	D5740	97.83			

Last Updated 07-30-07

MEDICAL-DENTAL PROCEDURES

The manual contains a listing of codes which can be classified as either medical or dental procedures. All of these services will require prior authorization before the services are performed to determine if the claim will be filed under Dakota XIX or filed with Medical Services within the Department of Social Services.

When authorization is given and the predetermination voucher returned to the treating dentist, payment for most of the codes will be based on 55% of billed charges or the DDPSD Usual, Customary and Reasonable fee, whichever is less.

In order for TMJ procedures to be covered under the Dakota XIX program, the problem must be specifically related to the dental malocclusion.

SPECIALTY CODES MEDICAL-DENTAL PROCEDURE CODES/ALLOWANCES

D0320	Temporomandibular joint arthogram, including injection	49.78
D0321	Other TMJ films, by report	61.68
D0322	Tomographic survey	43.83
	<u>DONTICS</u>	
D4210	Gingivectomy or gingivoplasty (four or more contiquous teeth)	179.85
D4211	Gingivectomy or gingivoplasty (one to three contiquous teeth)	68.18
D4240	Gingival flap procedure (four or more contiquous teeth)	200.19
D4241	Gingival flap procedure (one to three contiquous teeth)	165.98
D4260	Osseous surgery (four or more contiquous teeth)	254.30
D4261	Osseous surgery (one to three contiquous teeth)	152.57
D4270	Pedicle soft tissue graft procedure	205.60
D4271	Free soft tissue graft procedure	238.06
D4341	Periodontal scaling/root planing, four or more teeth (requires prior	95.45
	authorization)	
D4342	Periodontal scaling/root planning, one to three teeth(requires prior	57.27
	authorization)	
ORAL	SURGERY	
D7260	Oroantral fistula closure	529.81
D7280	Surgical exposure of impacted/unerupted tooth	207.77
D7283	Placement of device to facilitate eruption of impacted tooth	55%
D7285	Biopsy of oral tissue (hard)	151.93
D7286	Biopsy of oral tissue (soft)	103.24
D7290	Surgical repositioning of teeth, by report	137.65
D7291	Transseptal fiberotomy, by report	89.60
D7410	Excision of benign lesion up to 1.25 cm	132.45
D7411	Excision of benign lesion over 1.25 cm	185.70
D7412	Excision of benign lesion, complicated	379.17
D7413	Excision of malignant lesion up to 1.25 cm	441.50
D7414	Excision of malignant lesion over 1.25 cm	775.23
D7414 D7415	Excision of malignant lesion, complicated	775.23
D7410 D7440	Excision of malignant tumor-lesion diameter up to 1.25 cm	375.93
D7441	Excision of malignant tumor-lesion diameter over 1.25 cm	262.30
D7441 D7450	Removal of benign odontogenic cyst or tumor-lesion diameter up to 1.25 cm	202.30 227.25
D 1 100	romovar or beingh odomogeme cyst or tumor-resion diameter up to 1.20 cm	221.20

RADIOGRAPHS

D7451	Removal of benign odontogenic cyst or tumor-lesion diameter over 1.25 cm	227.25
D7460	Removal of benign nonodontogenic cyst or tumor-lesion diameter up to 1.25 cm	227.25
D7461	Removal benign nonodontogenic cyst or tumor-lesion diameter over 1.25 cm	227.25
D7465	Destruction of lesion by physical methods: electro-surgery, chemotherapy,	162.32
	cryotherapy, or laser	
D7490	Radical resection of mandible with bone graft	300.61
D7510	Incision and drainage of abscess-intraoral soft tissue	90.90
D7520	Incision and drainage of abscess-extraoral soft tissue	375.93
D7530	Removal of foreign body, skin, or subcutaneous areolar tissue	149.33
D7540	Removal of reaction-producing foreign bodies-musculoskeletal system, by report	185.04
D7550	Sequestrectomy for osteomyelitis	387.62
D7560	Maxillary sinusotomy for removal of tooth fragment or foreign body	357.10
D1000	maximary sinuscionity for removar of tooth fragment of foreign body	001.10
TREATN	MENT OF FRACTURES-SIMPLE	
D7610	Maxilla-open reduction	2,167.91
D7620	Maxilla-closed reduction	1,187.52
D7630	Mandible-open reduction	1,688.11
D7640	Mandible-closed reduction	1,177.13
D7650	Malar and/or zygomatic arch-open reduction	1,814.06
D7660	Malar and/or zygomatic arch-closed reduction	499.28
D7670	Alveolus –closed reduction stabilization of teeth	499.28 486.95
D7671	Alveolus –open reduction stabilization of teeth	714.20
D7680	Facial bones-complication reduction with fixation and multiple surgical approaches	2,741.87
TREATI	MENT OF FRACTURES-COMPOUND	
$\frac{11027113}{D7710}$	Maxilla-open reduction	2,276.34
D7710	Maxilla-closed reduction	1,319.97
D7720 D7730	Mandible-open reduction	2,276.34
D7730 D7740	Mandible-closed reduction	1,177.13
D7750	Malar and/or zygomatic arch- open reduction	1,378.40
D7760	Malar and/or zygomatic arch-closed reduction	514.87
D7770	Alveolus-stabilization of teeth-open reduction splinting	784.96
D7780	Facial bones-complicated reduction with fixation and multiple surgical approaches	784.96
REDUC'	TION OF DISLOCATION AND MANAGEMENT OF OTHER TMJ DYSFUNCTION	ONS
D7810	Open reduction of dislocation	1,454.37
D7820	Closed reduction of dislocation	448.65
D7830	Manipulation under anesthesia	227.25
D7840	Condylectomy	55%
D7850	Surgical discectomy; with or without implant	55%
D7850 $D7852$	Disc repair	55%
D7854	Synovectomy	55% 55%
D7856	Myotomy	55%
D7858	Joint reconstruction	55%
D7860	Arthrotomy	55%
D7865	Arthoplasty	55%
D7870	Arthrocentesis	55%
D7872	Arthroscopy-diagnosis; with or without biopsy	55%
D7873	Arthroscopy-surgical; lavage and lysis of adhesions	55%
D7874	Arthroscopy-surgical; disc repositioning and stabilization	55%
D7875	Arthroscopy-surgical; synovectomy	55%
D7876	Arthroscopy-surgical; discectomy	55%
D7877	Arthroscopy-surgical; debridement	55%
D7880	Occlusal orthotic appliance, by report	295.87
Last Updat	ted 07-30-07	

D7899	Unspecified TMD therapy, by repor	BR
D7910	Suture (repair) of recent small wounds up to 5 cm	87.65
D7911	Suture (complicated) up to 5 cm	109.08
D7912	Suture (complicated) over 5 cm	129.85
D7920	Skin grafts (identify defect covered, location, type), by report	282.44
D7940	Osteoplasty- for orthognathic deformities	422.02
D7941	Osteotomy- mandibular rami	2,545.79
D7943	Osteotomy- mandibular rami with bonegraft, includes obtaining the graft	2,963.27
D7944	Osteotomy- segmented or subapical, per sextant or quad	1,773.81
D7945	Osteotomy- body of mandible	2,582.80
D7946	LeFort I (maxilla-total)	2,951.59
D7947	LeFort I (maxilla-segmented)	3,197.01
D7948	LeFort II or LeFort III (osteoplasty of facial bones, w/o bone graft)	55%
D7949	LeFort II or LeFort III - with bone graft	55%
D7950	Graft of mandible (osseous, osteoperiosteal, or cartilage graft of	180.50
	mandible-nonautogenous or autogenous)	
D7955	Repair of maxillofacial soft or hard tissue defect	180.50
D7960	Frenulectomy (frenectomy or frenotomy); separate procedure	126.61
D7970	Excision of hyperplastic tissue, per arch	129.85
D7971	Excision of pericoronal gingiva	64.27
D7980	Sialolithotomy	124.66
D7981	Excision of salivary gland	653.82
D7982	Sialodochoplasty	659.01
D7983	Closure of salivary fistula	55%
D7990	Emergency tracheotomy	55%
D7991	Coronoidectomy	55%
D7992	Eminenectomy	55%
D7999	Unspecified oral surgery procedure, by report	55%